

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 660038

FILED  
Feb 17, 2012  
Secretary of State

**Entity Name:** NICHOLS BROSCH WURST WOLFE & ASSOCIATES, INC.

**Current Principal Place of Business:**

161 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

161 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 59-1951996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BROSCH, BRUCE F DP  
161 ALMERIA AVE.  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BROSCH, BRUCE F PRES  
Address: 161 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: V  
Name: NICHOLS, JOHN R. V  
Address: 161 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: V  
Name: WURST, JAMES P V  
Address: 161 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: V  
Name: WOLFE, DONALD F V  
Address: 161 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRAUCE F. BROSCH

PRES

02/17/2012

Electronic Signature of Signing Officer or Director

Date